

RECEIVED

SEP 29 2003

TECHNOLOGY CENTER R3700

PATENT

Attorney Docket No. ADI-022

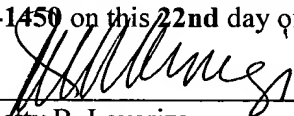
(257/10)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Lussier
SERIAL NO.: 09/630,938 GROUP NO.: 3728
FILING DATE: 2-Aug-00 EXAMINER: M.D. Patterson
TITLE: CHASSIS CONSTRUCTION FOR AN ARTICLE OF FOOTWEAR

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to **Mail Stop Appeal Brief - Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450** on this 22nd day of September, 2003.


Betty B. Leveriza

Mail Stop Appeal Brief - Patents
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir/Madam:

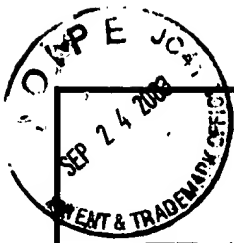
Submitted are the following:

- 1) Transmittal Form (1 pg.);
- 2) Fee Transmittal (1 pg.);
- 3) Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences (1 pg.);
- 4) Brief on Appeal under 37 C.F. R. § 1.192 (77 pgs.) in triplicate;
- 5) Petition for Extension of Time under 37 CFR 1.136(a) (1 pg.);
- 6) check for \$430.00 for \$320.00 filing fee and \$110.00 one-month extension fee;
- 7) duplicate copy of fee authorization (1 pg.); and
- 8) a return receipt postcard.

GAFFBM25726.2686215_1

AF737284

#25
Brief
C. Patterson
10/1/03



TRANSMITTAL FORM

Application Serial Number	09/630,938
Filing Date	2-Aug-00
First Named Inventor	LUSSIER
Group Art Unit	3728
Examiner Name	Marie D. Patterson
Attorney Docket No.	ADI-022
BATCH NO. (after allowance)	N/A
Patent No.	N/A
Issue Date	N/A

RECEIVED

SEP 29 2003

TECHNOLOGY CENTER R3700

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input checked="" type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
--	--	--

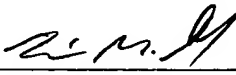
CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

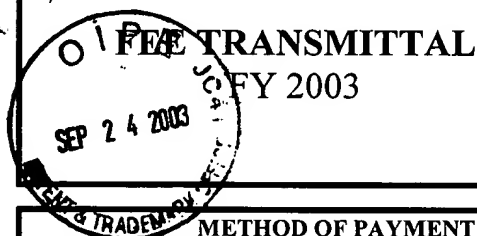
SIGNATURE BLOCK

Date: September 22, 2003
Reg. No. 44,691
Tel. No.: (617) 310-8085
Fax No.: (617) 790-0332
Email: gaff@tth.com

Respectfully submitted,



Brian M. Gaff, Esq.
Attorney for Appellant
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110



Complete if Known	
Application Serial Number	09/630,938
Filing Date	2-Aug-00
First Named Inventor	LUSSIER
Group Art Unit	3728
Examiner Name	Marie D. Patterson
Attorney Docket No.	ADI-022

RECEIVED
SEP 29 2003
TECHNOLOGY CENTER R3700

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																							
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				3. ADDITIONAL FEES																																																																																																							
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																																											
3. <input type="checkbox"/> Applicant claims small entity status.																																																																																																											
FEE CALCULATION																																																																																																											
1. FILING FEE																																																																																																											
<table border="1"><thead><tr><th>Large Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>740</td><td>Utility filing fee</td><td></td></tr><tr><td>330</td><td>Design filing fee</td><td></td></tr><tr><td>160</td><td>Provisional filing fee</td><td></td></tr></tbody></table>				Large Entity Fee (\$)	Fee Description	Fee Paid	740	Utility filing fee		330	Design filing fee		160	Provisional filing fee																																																																																													
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																																									
740	Utility filing fee																																																																																																										
330	Design filing fee																																																																																																										
160	Provisional filing fee																																																																																																										
<table border="1"><thead><tr><th>Number Filed</th><th>Number Extra</th><th>Rate</th><th>Amount</th></tr></thead><tbody><tr><td>Total Claims</td><td>- 20 =</td><td>x \$ 18.00 =</td><td></td></tr><tr><td>Independent Claims</td><td>- 3 =</td><td>x \$ 84.00 =</td><td></td></tr><tr><td colspan="3"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td><td>\$280.00 =</td></tr><tr><td colspan="3">TOTAL:</td><td></td></tr><tr><td colspan="3">SMALL ENTITY DISCOUNT:</td><td></td></tr><tr><td colspan="3">SUBTOTAL (1)</td><td>(\$)</td></tr></tbody></table>				Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 18.00 =		Independent Claims	- 3 =	x \$ 84.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =	TOTAL:				SMALL ENTITY DISCOUNT:				SUBTOTAL (1)			(\$)																																																																												
Number Filed	Number Extra	Rate	Amount																																																																																																								
Total Claims	- 20 =	x \$ 18.00 =																																																																																																									
Independent Claims	- 3 =	x \$ 84.00 =																																																																																																									
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =																																																																																																								
TOTAL:																																																																																																											
SMALL ENTITY DISCOUNT:																																																																																																											
SUBTOTAL (1)			(\$)																																																																																																								
2. AMENDMENT CLAIM FEES																																																																																																											
<table border="1"><thead><tr><th>Claims Remaining After Amend.</th><th>Highest No. Previously Paid For</th><th>Present Extra</th><th>Rate</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total</td><td>-</td><td>=</td><td>x \$ 18.00 =</td><td></td></tr><tr><td>Indep.</td><td>-</td><td>=</td><td>x \$ 84.00 =</td><td></td></tr><tr><td colspan="3"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td>+ \$280.00 =</td><td></td></tr><tr><td colspan="3">TOTAL:</td><td></td><td>(\$)</td></tr><tr><td colspan="3">SMALL ENTITY DISCOUNT:</td><td></td><td>(\$)</td></tr><tr><td colspan="3">SUBTOTAL (2)</td><td></td><td>(\$)</td></tr></tbody></table>				Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 18.00 =		Indep.	-	=	x \$ 84.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)																																																																					
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																																							
Total	-	=	x \$ 18.00 =																																																																																																								
Indep.	-	=	x \$ 84.00 =																																																																																																								
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =																																																																																																								
TOTAL:				(\$)																																																																																																							
SMALL ENTITY DISCOUNT:				(\$)																																																																																																							
SUBTOTAL (2)				(\$)																																																																																																							
				<table border="1"><thead><tr><th>Large Entity Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr><tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td>110.00</td></tr><tr><td>400</td><td>200</td><td>Extension for reply within second month</td><td></td></tr><tr><td>920</td><td>460</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1440</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1960</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>320</td><td>160</td><td>Notice of Appeal</td><td></td></tr><tr><td>320</td><td>160</td><td>Filing a brief in support of an appeal</td><td>320.00</td></tr><tr><td>280</td><td>140</td><td>Request for oral hearing</td><td></td></tr><tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr><tr><td>740</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>740</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr><tr><td colspan="2">SUBTOTAL (3)</td><td colspan="2">(\$)</td></tr><tr><td colspan="2">SUBTOTAL (1)</td><td colspan="2">0.00</td></tr><tr><td colspan="2">SUBTOTAL (2)</td><td colspan="2">0.00</td></tr><tr><td colspan="2">SUBTOTAL (3)</td><td colspan="2">430.00</td></tr><tr><td colspan="2">TOTAL</td><td colspan="2">(\$)</td></tr></tbody></table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month	110.00	400	200	Extension for reply within second month		920	460	Extension for reply within third month		1440	720	Extension for reply within fourth month		1960	980	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal	320.00	280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		740	370	Filing a submission after final rejection (37 CFR 1.129(a))		740	370	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify)				Other fee (Specify)				SUBTOTAL (3)		(\$)		SUBTOTAL (1)		0.00		SUBTOTAL (2)		0.00		SUBTOTAL (3)		430.00		TOTAL		(\$)	
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																								
130	65	Surcharge - late filing fee or oath																																																																																																									
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																																									
130	130	Non-English specification																																																																																																									
2,520	2,520	Request for ex parte reexamination																																																																																																									
110	55	Extension for reply within first month	110.00																																																																																																								
400	200	Extension for reply within second month																																																																																																									
920	460	Extension for reply within third month																																																																																																									
1440	720	Extension for reply within fourth month																																																																																																									
1960	980	Extension for reply within fifth month																																																																																																									
320	160	Notice of Appeal																																																																																																									
320	160	Filing a brief in support of an appeal	320.00																																																																																																								
280	140	Request for oral hearing																																																																																																									
130	130	Petitions to the Commissioner																																																																																																									
180	180	Submission of Information Disclosure Statement																																																																																																									
740	370	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																									
740	370	For each additional invention to be examined (37 CFR 1.129(b))																																																																																																									
100	100	Certificate of Correction for applicant's error																																																																																																									
Other fee (Specify)																																																																																																											
Other fee (Specify)																																																																																																											
SUBTOTAL (3)		(\$)																																																																																																									
SUBTOTAL (1)		0.00																																																																																																									
SUBTOTAL (2)		0.00																																																																																																									
SUBTOTAL (3)		430.00																																																																																																									
TOTAL		(\$)																																																																																																									
CORRESPONDENCE ADDRESS				SIGNATURE BLOCK																																																																																																							
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully submitted, Brian M. Gaff, Esq. Attorney for the Appellant Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Date: September 22, 2003 Reg. No.: 44,691 Tel. No.: (617) 310-8085 Fax No.: (617) 790-0332 Email: gaff@tth.com																																																																																																							